

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Slip or Fall of Person		3. Date/Time of Accident 09/23/2011 08:30 AM		4. Date/Time of Death 09/23/2011 10:15 AM		5. Fatal Case No 10		
6. Mine Information :										
a) Mining Company Name Lafarge North America, Inc.			b) Mine Name Freedom Pit			c) Parent of Mining Company Lafarge S A				
7. Mine Location :		a) City Delevan		b) County Cattaraugus		c) State NY		8. Mine ID Number: 30-01582		9. Union: YES
10. Primary Mineral Mined: CONSTRUCTION SAND & GRAVEL M			11. Number of Mine Employees:		a) Total 6	b) Underground	c) Open Pit/Quarry 6	d) Mill/Prep Plant	e) Other	
12. Contractor Name:						13. Union		14. Contractor ID Number:		
15. Contractor Address:		a) City			b) County		c) State		d) Zip Code	
16. Number of Contractor Employees:		a) Total	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other				
17. Number of Persons in Mine at Time of Accident:					18. Number of Persons Unaccounted For:					
a) Mine Employees: 5		b) Contractor Employees:			a) Mine Employees:		b) Contractor Employees:			
19) Location of Accident									20. Mining Height:	
<input type="checkbox"/> 01-Underground	<input checked="" type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> Other (specify)					Feet	Inches
<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 06-Dredge Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 99-Office Facility							
21. Nonfatal Injuries:			22. Fatal Injuries:		1					
23. Victim Information :					a) Name John P. Collingwood					b) Age 32
c) Regular Job Title: Plant Operator				d) Activity at Time of Accident: Plant Maintenance				<input checked="" type="checkbox"/> Mine Employee		
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days		
a) Total:	10	1	b) at the mine:	10	1	c) at activity (23d)	10	1	d) with Contractor	
25. Autopsy Performed: If Yes, Location NO						26. Mine Telephone No.: (716) 353-4633				

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

The victim was changing a screen in the plant when he fell approximately 56 feet to the ground below.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer: Not listed			29. Model:			
30. District: M2000 Northeastern		32. Field Office: Geneva NY			33. Event Number: 6567476	
34. Accident Investigator: Thomas J. Shilling			35. MSHA Person Notified: Kevin H. Abel		Date 09/23/2011	Time 09:02 A
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>			Date 09/23/2011	
38. Reason For Amendment:						